

County of Gloucester
Human Resources Manual

CHAPTER:	7 – CONDUCT AND PERFORMANCE	ADOPTED: 10/2/19
SECTION:	4 – HOURS OF WORK	REVISED: 5/22/24

EXHIBIT B – APPROVAL REQUEST WORKDAY OFF-SITE

To: _____ (County Administration)

From: _____ (Department Head)

Employee: _____ Travel Date(s): _____

Department: _____ Destination: _____

Purpose (detail): _____

Approvals:

Department Head: _____ Date: _____

County Administrator: _____ Date: _____

Proof of attendance required? YES or NO

Post off-site date, proof of attendance received _____

Initials _____

Department Head/County Administrator/Designee